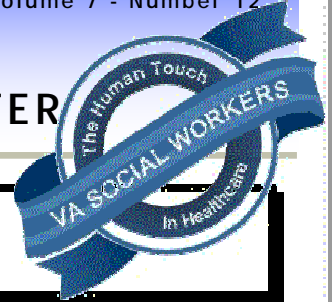


SYNERGY

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THE NATIONAL VA SOCIAL WORK NEWSLETTER

Homeless Veterans



HEALTHCARE FOR HOMELESS VETERANS PROGRAM

Submitted by: Julie Laurenzi, LCSW-R, ACSW Program
Coordinator, Albany NY

The Healthcare for Homeless Veterans (HCHV) Program in Albany, New York began in 1992 as an Outreach Program serving primarily the Capital District of New York State (NYS). At that time, the Albany VA collaborated with community partners to contract for transitional beds for homeless veterans. They were fortunate to obtain supportive apartments through cooperation with Albany Housing Authority as well as a VASH program grant which utilized section 8 vouchers. One partner in western Massachusetts received a VA Capital Grant under the VA G&PD program and that enhanced the options which were offered to homeless veterans for housing.

In the fall of 1998 the Albany VA HCHV program incorporated into a VISN HCHV program with four other Upstate NY HCHV programs. A new model and continuum of care was created. Some creative aspects of this collaboration were the creation of a Homeless Domiciliary at Canandaigua and the hiring of new staff to outreach to outlying areas. One example was the hiring of Tara Brennan LCSW who was given a van, laptop and cell phone to provide services to veterans in the remote Adirondack region of NYS. She is a vital part of the HCHV team and links to all team meetings, in-services, etc through telephone connections. Network 2 takes a systems approach to meet identified needs, collaborating with community providers to excel in the provision of care. In an effort to maximize their data driven approach, they have developed a real-time data base which is immensely useful to all providers as well as management.

The HCHV coordinators and teams meet monthly at the Network level to review their goals, successes and challenges. They also have held annual retreats to recognize the staff who work so well together as a team.

The Mission: The central goal for the Healthcare of the Homeless Veterans (HCHV) Program in VISN 2 is to end homelessness among veterans through outreach efforts and community partnerships. Veterans are engaged in treatment and rehabilitation programs to enable them to achieve a better quality of life.

NEW

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The Vision: To be the prototype homeless program of the next century driven by the mastery of change, challenge and purpose.

The Challenge:

Provide the community with continuity of care for the homeless, while assuring trust, respect, compassion, commitment and excellence.

"It's clear that the mission, vision and values of this program are not mere words on a piece of paper, they are the heart and soul of this program."

Program Initiatives:

- Outreach
- Homeless Stand Down Events
- Continued expansion of Grant and Per Diem Housing, particularly with regard to special enhancement grant for veterans with intensive mental health needs
- CHALENG(Community Homeless Assessment and Local Education & Networking Groups)
- Food Pantry
- Information and Referral Services
- Community Partnerships

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As the program continued to grow and expand, the team looked at their current housing options utilized by the homeless veterans in VISN 2. These programs included a residential program, 5 transitional housing programs, Section 8 supportive housing, dental benefits to homeless veterans, increased case management services, increased outreach initiatives to prison and jail populations, and increased outreach to the Catskill and Adirondack regions of New York State (NYS).

To reach the large population of homeless incarcerated veterans they utilize a link between Network 3, the Department of Corrections, VBA, and the Department of Labor which has been in place for the last 1 1/2 years.

In 2004, the Albany HCHV Program successfully met the following initiatives:

- Supported 2 new applications for Enhancement Grants under the Homeless Grant & Per Diem (G&PD) Program
- Added one new per diem provider (28 beds)
- Participated in NYS Prison Outreach Program (across 2 VA Networks)
- Developed and implemented a new linkage program with VBA for improved access to benefits
- Participated in enhanced Care Coordination through video phone screenings for G&PD candidates

Their outcome performance measures for FY03 and FY04 provide a testament to the continued success of the program.

FY03

- Housing increased 72%
- Employment increased 56.5%
- 684 unique veterans, average of 41 intakes per month

FY04

- Housing: 84.5%
- Employment: 64.4%
- 665 unique veterans, average of 55 intakes per month.

They found that being creative in getting services to the homeless provided a wide range of community options. Meeting on regular basis helps to keep team members focused on the mission and the vision of this homeless population.

The HCHV Program in Network 2 has had 2 CARF visits in 2001 and 2004, both meeting with extremely high marks for quality of care by the surveyors. The Administrative CARF Surveyor stated "It's clear that the mission, vision and values of this program are not mere words on a piece of paper, they are the heart and soul of this program."

**2004 Health Care Services
Spirit of Excellence Award**
Presented to VISN 2 Homeless Program by
Sedexho Corporation

Demographics of Homeless Veterans

The Forgotten Americans-Homelessness: Programs and the People They Serve

Veteran Specific Highlights:

- 23% of homeless population are veterans
- 33% of male homeless population are veterans
- 47% Vietnam Era
- 17% post Vietnam
- 15% pre Vietnam
- 67% served three or more years
- 33% stationed in war zone
- 25% have used VA Homeless Services
- 85% completed high school/GED compared to 56% of non-veterans
- 89% received Honorable Discharge
- 79% reside in central cities
- 16% reside in suburban areas
- 5% reside in rural areas
- 76% experience alcohol, drug, or mental health problems
- 46% white males compared to 34% non-veterans
- 46% age 45 or older compared to 20% non-veterans

Service needs:

- 45% help finding job
- 37% finding housing

Information is provided from the "National Coalition for Homeless Veterans"

<http://www.nchv.org/background.cfm#facts>

released Dec. 8, 1999, by the Interagency Council on the Homeless. The National Survey of Homeless Assistance Providers and Clients (NSHAPC), which was completed in 1996 and updated three years later.

You can visit www.huduser.org and download the NSHAPC reports from there.

A 10 YEAR REVIEW OF A VA PILOT PROJECT

Homeless Veterans with Substance Abuse

COMPENSATED WORK THERAPY/THERAPEUTIC RESIDENCE PROGRAM

NORTHAMPTON VA - CHERRY STREET PROGRAM

Submitted by Beth Graziadei, LICSW, Program

Manager- Cherry Street Program,

Edited by Jennifer Summers, LICSW - Synergy Editor-
Clinical Social Worker, Northampton VA

In the early 1990's, as part of a national effort by the VA to aggressively treat substance abuse and homelessness, ten VA Medical Centers were chosen to be part of a pilot project to develop therapeutic residences to enhance the continuum of care for veterans. The Northampton VA was one of the ten programs.

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The Northampton VA purchased a house with four, nine-room apartments. The funding provided by the pilot project paid for the purchase of the home as well as the renovations. The wiring, heating and sprinkler systems were updated as well. As the apartments were rehabbed, veterans moved into them and in turn helped with further renovations to the building. The program opened in 1995.

The Cherry Street program, named after its' location (it is on the corner of Cherry and Market Street in Northampton, MA) is a Compensated Work Therapy/Therapeutic Residence Program, PRRT (Psychosocial Residential Rehabilitation Therapeutic Program). The program is a domiciliary level of care.

PROGRAM GOALS:

- Help build a foundation in recovery
- Permanent employment
- Permanent housing.
- Build self esteem and confidence
- Reduce reliance on the medical center

The Cherry Street Program involves three components:

- Substance Abuse - The substance abuse treatment component is intended as a continuation of the spirit and direction of the therapy residents received while they were in the Northampton Substance Abuse Treatment Program or other VA and community substance abuse programs. Its aim is to enable veterans to continue to change their behavior and foster personal growth
- Residential Component - The residential component provides a supportive environment in which the veteran can develop independent living skills as s/he experiences the responsibilities, rights and privilege of therapeutic living.
- Vocational Component - The vocational component offers a structured, supportive and supervised environment that enhances the likelihood of successful learning experiences and accomplishment of tasks. It consists of a rehabilitation program whose major component is a work regime with monetary incentives derived from business contacts.

The community of 16 residents live in one of four apartments, with 4-5 veterans per apartment. Residents are responsible for purchasing their own food and cleaning supplies. Residents share apartment upkeep responsibilities. Each apartment has a full kitchen, living and dining room with TV's and DVD's as well as laundry facilities in the basement. Further assistance is received through a program with the local transit authority. Each resident is given a free, 3-month bus pass to use local bus transportation. Beth Graziadei, Program Director, identified lack of transportation as a major obstacle to veterans being involved in the community. She worked with the local transit authority to resolve the problem by using bus passes. Residents are also provided with names of local food pantries,

location for applying for food stamps and the location of local survival center. Residents may also get a gift card to the local supermarket. Cherry Street purchases the gift cards and the veteran pays the program back when s/he has established a steady income.

ADMISSION CRITERIA:

- Substance abuse diagnosis, though dual diagnosis veterans are accepted as well
- Capable of independent living skills
- Willingness to work and get back into the community.

Upon admission, veterans are initially involved in TWE (Transitional Work Experience, which was previously known as WOT - Work Opportunities Training). They work for 2-4 months and then transition into regular employment. Weekly case management is provided with more intensive mental health treatment provided by the Mental Health Clinic at the Northampton VA. Case management services include, but are not limited to, finances, budgeting, child rearing, custody issues or legal issues.

Residents also have access to the Northampton VA for medical services and they utilize the Vocational Rehabilitation and Employment Program.

*The Cherry Street,
the pathway to
success.*

STAFFING:

- Full Time Program Director, Beth Graziadei, LICSW. Beth provides 1:1 case management as well as the overall responsibility of program management. She meets with her residents once/week.
- Alcohol Rehab Therapist, Kris Waskiewicz. works 20 hrs a week. Kris runs a Recovery program and carries a caseload as well. Like Beth, Kris meets with her residents once/ week.
- House managers are usually graduates of the program and they cover the off-tour duties, 3 nights/week and weekends. The house managers live at Cherry Street.

Along with the AA/NA meetings at Cherry Street, there are house meetings which help residents develop a sense of community. The meetings have featured guest presenters, including accountants to talk about budgeting; employment professionals to talk about writing resumes, job performance expectations and interview skill development; and lawyers to review legal issues.

Veterans work together to upkeep the residence. They do their own snow shoveling in the winter and lawn mowing in the summer. Residents plant flowers and have a garden that is for everyone to use and enjoy. The community may also pick special projects around the house to work on over the summer. This summer they built a horseshoe pit for playing horseshoes.

Outside activities may include picnics, mystery rides, barbecues and community service (i.e. toy drives and regional AA picnics).

The residents have a lot of respect for the program. They like the fact that they can be in a clean and sober environment that is structured and predictable. The structure helps the staff and residents; everyone is expected to follow the "rules of the house".

STATISTICS: *Successful Discharges = completed program + housing in the community + community employment + sobriety*

- **FY01 --- 18%**
- **FY02 --- 35%**
- **FY03 --- 34%**
- **FY04 --- 65%**
- **FY05 to present --- 50%**

BED UTILIZATION: *Capacity = 16 residents*

- **FY01 --- 79.33%**
- **FY02 --- 95.31%**
- **FY03 --- 91.68%**
- **FY04 --- 91.62%**
- **FY05 thru present --- 93.56%**

Cherry Street maintains an open door policy for its graduates. Many will come back and visit or serve as support and role models for current residents, giving them a sense of community. There is an annual picnic and holiday open house for "Friends of Cherry Street". Staff, current residents, graduates and significant others often attend these functions. The open houses also show residents who are in the program that people can have long term recovery. They are able to share with the graduates the many "successful veteran stories in recovery".

Cherry Street has been certified by CARF on two separate occasions and is JCAHO approved.

RURAL HOMELESS VETERAN SERVICES

Submitted by: Vianne F Marchese, LCSW
Coordinator, Health Care for Homeless Veterans.
North Florida/South Georgia Veterans Health System

The Health Care for Homeless Veterans (HCHV) Program at the North Florida/South Georgia Veterans Health System encompasses 33 counties in Florida and 19 counties in Georgia. The majority of these counties are rural and the geographic area is vast. Along with a general increase in veteran population in Florida, there has been an increase in the homeless population. The homeless population grows as homeless veterans migrate south seeking temperate climates, job opportunities and close proximity to VA health care services.

In the rural North Florida/South Georgia homeless programs, the program social workers have had to be creative in reaching out to these veterans.

In serving such a large, mostly rural area we found the following to be effective in serving the veterans:

- 11 stand downs in FY04 (although this number was scaled down in FY05 goals as it proved to be very labor intensive with minimal benefits)
- 5 stand downs in FY05 that were concentrated on the larger populations within the counties served
- 1:1 outreach in FY05 (HCHV now has more time to do this after reduction of the number of stand downs they participated in)
- Use of social work community organization skills, clinical skills and administrative skills
 - ◆ Partnerships with community service providers that were already working with the homeless population.
 - ◆ Continual follow-up and review of services
 - ◆ Show of consistency and dependability in providing services and staffing.
- HCHV team collaboration with the Miami VA homeless program in a pilot tele-health project
 - ◆ The project will use a van to travel to rural parts of the NF/SG VA for mental health evaluations. The HCHV team is working with the mobile service center to identify locations.

In summary the HCHV team found that consistent 1:1 outreach is their best tool, coupled with a well-rounded team of social workers willing to think and act outside of the box. This approach has increased the ability of the North Florida/South Georgia Veterans Health System to serve the homeless veterans.

MOUNTAIN HOME HOMELESS PROGRAM A Personal Look

Submitted by: Dennis Thacker, LCSW, Outreach Clinician
Homeless Veterans Program, Mountain Home VA

The Homeless Program at Mountain Home began in 1987. The Healthcare for Homeless Veterans (HCHV) program provides outreach, assessment, basic services (such as food, clothing, transportation and case management) and coordination with both VA and community care providers for housing and supportive services. Over 250 homeless veterans received services last year. Program staff work with VA Grant & Per Diem programs and HUD's Shelter Plus Care.

The Urban Institute, in conjunction with the National Survey of Homeless Assistance Providers and Clients (NSHAPC) done in 1996, projected that:

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Each year, 2.3 million to 3.5 million people experience homelessness in America. By taking 23% of that range for veterans, that would indicate there are between 529,000 and 840,000 veterans who are homeless at some time during the year.

Work with the homeless is challenging. Moving a veteran from homelessness into home ownership is even more difficult and requires commitment and determination from the veteran as well as the community. This following story is about Mr. K. (who has given written permission to Mountain Home VA to allow his story to appear in this edition of SYNERGY). Mr. K. is a disabled USMC Vietnam Veteran who served from 1970-1979. Like many Vietnam veterans, Mr. K. did not seek treatment at the VA until years after his military discharge. Prior to his treatment with the VA he had spent the last 8 years living in the woods of North Carolina. Mr. K. had tried his hand at several different jobs but decided that he would have to leave the work force after realizing that he could not continue to cope with co-workers. The fear that he might actually harm someone else brought him to the VA for help in 1999. After hospitalization for depression and PTSD, he entered the domiciliary. Although he battled daily with the range of symptoms normally associated with PTSD, he responded well to therapy and support (on-going treatment has helped reduce this battle). He was able to transition into his own apartment in November of 2000 with a VA NSC pension.

In 2004, Mr. K. felt he might be asked to leave his apartment. Although he had to face his fears about moving, he decided to take a proactive role in seeking housing, rather than wait and be told he would have to leave. Mr. K. considered moving to a more secure apartment setting. But also liked the idea of being able to work with his hands to improve his surroundings, so living in a garage or small trailer was appealing as well. In maintaining a home, Mr. K. felt that being able to stay busy might serve to redirect his thoughts away from Vietnam.

With the unexpected death of his landlord in the summer of 2004, Mr. K.'s desire to do something soon was kindled by his not knowing how long he had at his present location.

After review of his finances, community resources and funding, the search to purchase a house began in December 2004. Mr. K. made his choice and through this home buying experience gained confidence in handling negotiations/interactions with the realtors, owners, and lawyers. Although the experience was certainly trying at times, Mr. K. reports that it was well worth the effort. He now owns a well maintained ranch style home located close to the VAMC where he still participates in treatment.

Editor's Note: *Dennis Thacker spent hours of his own personal time on days off as well as his regular work hours, working with Mr. K. He coordinated assistance*

for Mr. K. with Ruth Crawford, LCSW, Dr. Radford and a support team of other VA PTSD clinicians, as well as the regional SETH Coordinator (Support, Employment, Transportation, and Housing) for Frontier Health, a local community mental health center. Dennis pulled together money from the First Tennessee Development District and a Federal Home Loan. Through Dennis' work with the community, Mr. K. was able to purchase the home and keep his expenses for mortgage, taxes and insurance to \$208.00 a month, well within his NSC pension. This is truly a remarkable success story! Thank you, Dennis, for sharing this personal look into a homeless veteran's life.

HEY VA! HAVE YOU HEARD?

March 21, 2005

When one of VA social worker Wendy Hicks' terminal patients was transferred to a local hospital from the Southern Oregon Rehabilitation Center and Clinics (SORCC) infirmary in White City, Ore., she still found a way to serve the veteran. At the hospital, she met with the veteran to discuss how he wanted to manage his final affairs, including how to involve immediate family members who lived several hours away. With the end of the veteran's life approaching, Hicks met with him and his family, staying into the night to assist with funeral arrangements, including return of the veteran's remains to his hometown. When the hospital physician refused to sign the death certificate, the veteran's family contacted Hicks, explaining that the funeral home would not allow the service to take place without the certificate. A color guard ceremony would have to be cancelled, the remains would have to be returned for autopsy, and some family members could not attend a later burial. Although it was the weekend, Hicks contacted the SORCC on-call physician, explained the situation, and with his guidance completed the death certificate process. The veteran's funeral service proceeded according to his final wishes with all his family in attendance.

AWARDS



Jill E. Manske, ACSW, LISW,
Director, Social Work Service VA
Central Office

The Society of Social Work Leadership in Health Care

2005 Ida M Cannon Award Jill Manske

Jill Manske was awarded the 2005 Ida M. Cannon Award from the Society of Social Work Leadership in Health Care. This is the most prestigious SSWLHC award. It is given "to honor a national figure in health care social work for outstanding contributions to the leadership of social work in a health care setting." The recipient must have the ability to lead, organize and evaluate the provision of social work in health care and must exemplify the skills, qualities and ethics of our profession. Further, the recipient must have the ability to influence the health care system and the external environment in order to meet the psychosocial needs of patients, families and populations. **Kristin Day**, Deputy Director, Social Work Service VHA Central Office speaks for all VA social workers when she says:



Telly Award

Jill Manske

The Telly Awards honor outstanding local, regional, and cable television commercials and programs, as well as the finest video and film productions.

"Since 1978, our mission has been to strengthen the visual arts community by inspiring, promoting, and supporting creativity. We encourage a diverse field of entries. Last year, we received over 10,000 entries from all 50 states and 5 continents.

When the VHA Social Work Leadership Council first began discussing educating social workers about the military experiences of the veterans we serve, none of us expected the outcome to be a PBS-quality video that won a Telly Award. Since so few social workers are veterans themselves and since a VHA psychosocial assessment requires a military history, the Council members thought it was vital to provide training to help social workers understand what veterans experienced while on active military duty. A work group was charged with developing a training plan, which culminated in a partnership with EES to create a video. "The Price of Freedom: The Military Experience" exceeded all of our expectations. It received a standing ovation when it was premiered at the 2004 Uniformed Services Social Worker Conference. The Chief of Staff to the Secretary of Veterans Affairs was so impressed, she asked that it be used for new employee orientation in VBA and VHA. I am proud to have been a small part in the development of this excellent video and very proud of the Social Work leaders who worked so hard to earn this Telly Award. Congratulations to Judy Arnold, Jerry Satterwhite, Terry Harbert, Bob Hallett and Doug Mitchell for an excellent job!"

The Price of Freedom won 2 Telly awards – one for Government Relations and one for History/Biography.

"Jill is a transformational leader who in less than 5 years rebuilt the national VHA Social Work program from an empty office to a "go to" program leading the way in innovations in Seamless Transition and improved quality patient care, championing the skills and abilities of VHA social workers and promoting teamwork with our colleagues in all areas of VA. For the first time in VA history senior leaders have a working understanding of the skills and services social workers bring to the quality of care for our nation's veterans."

Please join me in saying,

"Congratulations Jill, we are so very proud of you and we deeply appreciate all you done on behalf of our patients and our profession."

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VHA Social Work Pioneer Awards

The following were presented the Pioneer Award. Their peers nominated them for exceptional achievements over the course of their careers in the field of social work.

Please accept our apology in not getting this information to you sooner, but our previous newsletter format did not allow us to have a large number of photos in one edition.

JERRY SATTERWHITE (Birmingham VAMC)



It is almost embarrassing to receive a Social Work Pioneer award for doing something I love to do, with people I love working with, for people I love to serve. It is also very humbling.

From the time I first knew there was such a thing as social work, I knew I wanted to eventually work for the VA. My first experience with the VA was as a volunteer at the Salisbury VAMC while I was in college. I was even married by a VA chaplain, so I guess my working for the VA was inevitable.

As I look back on 38 years of service, I do know one thing for sure. Anything I may have accomplished can be directly attributable to the social work staff in Birmingham. Because of their competence and dedication, I was able to spend time serving on committees and task forces. They hung with me as I tried to convince the VA world the answer to our problems was TALLY, then SWARS, then SWIMS. (For those of you who are too young to remember, these were information management systems that I still believe were better than Event Capture and DSS.)

So, I wish to take this opportunity to recognize and thank the Birmingham VA social work staff for their commitment to serving America's Heroes and for making me look good at the same time.



PAUL BURTON (Greater Los Angeles VA Health Care System) pictured with Jill Manske, Director Social Work Services VACO



GEORGE CASTILLO (Houston VA Medical Center) holding award.

Pictured with L to R -- Edgar L. Tucker, Director, Michael E. DeBakey VA Medical Center, George, Joseph DeVance Hamilton MD, Mental Health Executive, Miguel Ortega, LCSW, Social Work Practice Manager

I was humbled when I learned that my peers and mental health staff at the Michael E. DeBakey VA Medical Center had nominated me for this award, and even more honored to have been selected. There are so many other social workers that are doing just as much and deserve the recognition. I accepted this award, however, on behalf of all the support and assistance I have received over the years from VACO, our Medical Center Administration and professional social work and allied health care staff, and from our community VA partners who believed in our mission and in the lives of the homeless vets we serve.



HELEN BOSSHART (Augusta VA Medical Center, retired)

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TERRY HARBERT (Eastern Kansas Health Care System)
 Pictured with Craig Howard Associate Director

Excerpts from "Thoughts from Terry"

I asked if I could take a few minutes of everyone's time to say just a few words today as I receive a recognition that I am very proud of and want to share with those who really helped make new services for veterans and families possible and that is the social work staff in Eastern Kansas Health Care System. First, I would like to share with you a bit of my journey in VA in hopes you might understand why I want to serve veterans and in hopes that if you do not already share my passion that you might begin to share in it.

...I attended and graduated from Kansas State University and then got a Master's Degree in Social Work from the University of Oklahoma. At OU, I specialized in Community Organization and wanted to work to "change the world". ... I went to work for the Veterans Administration in 1971 at a time when VA was hiring hundreds of new social work staff nationwide. VA was not where I wanted to be, but was the best option I had for good paying work (by the way – my initial salary was in the neighborhood of \$9,000 a year for a masters degree social worker), which would allow me to begin paying off some tremendous school debt.... Well, I worked for about one year before I was called to Active Duty as an Infantry Officer (I went through ROTC in college and was commissioned). ... I often have thought since then, that we as a country do not really understand what we ask our soldiers to do and the fact that it means they are no longer able to be an "innocent". They have been taught to do that which goes against our upbringing. It is at least a sobering thought. But it is more than that – it is the reality for so many men and women that serve in the military. They have had to do things that none of us would want to do under ordinary circumstances. After they have had to do this – the question becomes how you go back home to the life you left. The answer is that you do not. And this friends is a part of the price of freedom for us all. Some soldiers do not come home at all, some come home wounded or permanently disabled and all come home changed and to families who have changed as well.

I returned to the VA after my discharge from the Army and unlike I had originally planned, I never left. I could have retired over two years ago, but I have not. I have lots of reasons why I stayed and continue to stay, but one of those reasons is foremost in my mind and that is this: I know the price of freedom – and it is not cheap. You can see it here everyday. Just look into the eyes of the veterans you see before you. Look at that wheel chair or those crutches. Check on that prosthesis where an arm or leg used to be. Watch one of them if the flag goes by. Watch them when they talk to each other. Watch them, talk to them, get to know them and listen to their unique stories. No freedom is not free, but it was given to all of us by our veterans and they gave it freely without demanding something beforehand. Surely, we can pay some of the price of our freedom in how we provide the medical care that they need now and we can do it in a way that honors each and every one of them. That is why I am still here.

Lastly, I want to say this. I am getting recognition from VACO for pioneering some services to veterans and families. I did not do any of this alone. I had help. Good help and a lot of it. I have been a Chief Social Worker in four VA Medical Centers and have been fortunate to work with the best and brightest. If I start naming names, we will be here way too long, but a bunch of them are in this room right now and to them I want to say that I know that this award is rightfully yours as well. You understand what we are about and the vital nature of our work. I am thankful every day to work with people like you. May God Bless you and this great country of ours.

Thank you.

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2005 USSW/VA

Social Worker of the Year.

Roberta "Bobbie" Rosenthal

Chief of Social Work Service San Francisco VAMC.



Jill E. Manske, ACSW, LISW, Director, Social Work Service
VA Central Office presenting award to Bobbie.

Bobbie is a true asset to the VA and exhibits exemplary service in the performance of her job.

• **Keith Armstrong, LCSW;** Rob Daroff, MD; Kew Lee, MD, Robert Outenreath, MD, Lee Rawitscher, MD and Elizabeth Stuart, MD, have been recognized for excellence in direct teaching from the Haile T. Debas Academy of Medical Educators <<http://medschool.ucsf.edu/academy/>>. They were among only 65 faculty members from 20 departments at all sites at UCSF to receive the award.

• **Cathy Clancy,** Director of Social Work Education, at the Michael E. DeBakey VA Medical Center in Houston will oversee two VA clinical rotations for the first doctoral students from Smith School of Social Work. The students will be starting in September

• **Irby Ferguson,** former Social Work Executive at the Wichita VA Medical Center and current SCI Coordinator at Gainesville, is the recipient of the Clinical Performance Award for 2005 from the American Association of Spinal Cord Injury Psychologists and Social Workers. This award is given to an active or associate member of the Association who has demonstrated outstanding performance in the area of clinical skill related to the psychosocial adjustment and rehabilitation of persons with SCI.

• **Willie Fields,** LCSW, Birmingham CWT/TR, Homeless Coordinator has been voted Man of the Year for the medical center.

• **Zelda Foster,** who retired as Chief of Social Work from the Brooklyn VAMC in 1997, has been elected

to the Columbia University School of Social Work Hall of Fame. This honor will be celebrated at a dinner on June 3. In addition to her leadership at Brooklyn, Zelda also taught at Columbia, NYU and Smith. She is the co-founder and first president of the New York State Hospice Association. We will have an interview with Zelda in a future issue of Synergy.



• **Beth Graziadei,** LICSW Director of Cherry Street Therapeutic Residence Program at Northampton VA received the "Employee of the Year Award". Be sure to read Beth's article on her Cherry Street Program on page 2 of this edition of SYNERGY.



• **Mike Husted,** LMSW, Social Work Service, receives the Gold Star Award from CTVHCS Director Bruce Gordon for his work as the VHA/DOD liaison assigned to Darnell Army Community Hospital at Ft. Hood. Mr. Husted has provided health care benefits to 2,452 veterans of which 2,118 were combat veterans. The Golden Star Award was established to allow patients and employees to identify staff who they feel are providing outstanding customer service, and to provide employees with positive recognition for providing patients with exceptional, outstanding service that goes well beyond the usual performance of duties expected on a routine basis.

• **The North Chicago VA Medical Center** recently received an award from the Loyola University School of Social Work, Carthage Campus, for outstanding field instruction in clinical training of Loyola Social Work graduate students.

• **David Rabb,** former supervisory social worker at the Minneapolis VAMC and current Executive Assistant to the Diversity Advisory Board in the Office of Management Support, was recently named Social Worker of the Year by the Minnesota Chapter of the National Association of Social Workers.

• **Lena Richardson,** Social Work Executive and Geriatrics & Extended Care Line Manager at the Augusta VAMC, was inducted into Manchester's "Who's Who Executive and Professional Registry". Induction into this registry is a real honor and a

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tribute to Lena's leadership and professional achievements.

- **Jerry Satterwhite**, Chief, Social Work Service Birmingham VA Medical Center received the Alabama chapter of NASW "Lifetime Achievement Award"
- **Laura Taylor**, coordinator of the Social Work Graduate Student Program at the Wichita VA Medical Center, has been selected as the recipient of the Margo Award for Excellence in Field Instruction from the University of Kansas School of Social Welfare. This award, named for Margaret Schutz Gordon (Professor Emerita and former Director of Field Practicum at the University of Kansas), recognizes social workers for their outstanding performance in field instruction and exceptional dedication to the profession of social work.
- **Ann Vasques-Kosta**, Social Work Section Chief and Supervisory Social Worker at the Northport VAMC, received the Director's Commendation Award. This Commendation is the highest level award given at the Northport VAMC and is granted for acts of unusual and distinguished accomplishment to the medical center or government. Ann was selected for her extraordinary leadership, outstanding contributions in the public interest and her remarkable contribution to the provision of patient care services.
- The NASW chapter of Ohio recognized the following social workers and a MSW student from the Dayton VA
 - ♦ **Charles Kilby**, supervisory social worker received the Lifetime Achievement award.
 - ♦ **Mike Martin**, residential care social worker received the Outstanding Service Award
 - ♦ **Kristina Walker**, MSW student intern from University of Cincinnati received the MSW Student of the Year award.

PROMOTIONS

- **Richard Adams** has been selected as the new Chief of Social Work at the Asheville, North Carolina VA Medical Center. Richard had previously served as Social Work Executive at the Sierra Nevada VA Health Care System in Reno.
- **Dr. Susan Angell**, the Associate Director at VA Long Beach, is



serving as Acting Social Work Executive.

- **Brian Brooks** is serving as the Acting Social Work Executive at the Iowa City VA Medical Center.
- **Irby Ferguson**, has been selected as the SCI Clinic Coordinator at Gainesville.
- **Larry Grueter**, former Chief of Extended Care & Social Work at Battle Creek, has been selected as Clinic Manager for the Grand Rapids Outpatient Clinic. Paul Schoenherr will be Acting Chief while recruitment is underway.
- **Terry Harbert**, Chief of Social Work at VA Eastern Kansas, has been given a new title and new responsibilities. Terry is now the Associate Chief of Staff for Community Care, which includes the centralized Social Work Service.
- **Lydia Henderson**, is the new Chief of Social Work at VA North Texas Health Care System in Dallas.
- **Gregg Joly** has been selected as the new Social Work Executive at the Minneapolis VA Medical Center. Gregg had served as Acting SW Executive since December 2004, when Roxanne Janovich retired. He has worked many years as a supervisory social worker at Minneapolis.



- **Ken Jones** has been selected as the new Chief of Social Work at the Salt Lake City VA Medical Center. Ken will be responsible for recentralizing Social Work after several years in a care line organizational structure.
- **Deborah Kunkel** is the new Social Work Executive at Fargo VA Medical Center
- **Bill Lanning**, supervisory social worker at VA Black Hills at the Hot Springs campus and Coordinator of the Addictive Disorders Services, has been appointed Coordinator of the VA Black Hills Compensated Work Therapy Program.
- **Johnna Matthews** has been selected as the new Social Work Executive at the Tuscaloosa VA Medical Center.
- **Mark Miller**, formerly SW Executive and current Chief, Mental Health Service at Iron Mountain, has been given that collateral duty again. Welcome back, Mark!
- **Karen Neuman** has been selected as the new Chief of Social Work at the Ann Arbor VA Medical Center, effective September 2005. Karen is currently on faculty at the Virginia Commonwealth University School of Social Work and has a health care leadership background
- **Bob Phaijah**, former Social Work Executive at El Paso and Social Work Chief at Iron Mountain and Columbia (Missouri) VAMC's, has been selected as the new Chief of Social Work for VA Nebraska-Western Iowa.

Continued on page 11

- **Karri Primak** is serving as the acting Social Work Executive at the Cheyenne, Wyoming VA Medical Center
- **George Sutton** has been selected as the new Social Work Executive at the El Paso VA Outpatient Clinic. He is assigned to the Behavioral Health Service and will oversee the practice of all social workers at El Paso.
- **Laura Taylor** has been selected as the Social Work Executive at the Wichita VAMC.
- **Renee Taylor** will serve as Acting Social Work Executive at Poplar Bluff.
- Three Social Work Chiefs who have been serving as Acting Associate Directors at their facilities.
 - ♦ **Larry Peterson** has been Acting Associate Director at the Durham VAMC since May 2004.
 - ♦ **Clay King** has been Acting Associate Director at the San Diego VAMC since August 2004.
 - ♦ **John Sperandeo** has been Acting Associate Director at the Northport VAMC since March 2005.

on July 4, 2004. SFC M.H. had served 15 months in Iraq before sustaining severe injuries to his arm as a result of the incident. Since then, SFC M.H. has undergone a series of surgeries, and remains on active duty status. He now volunteers and receives care on a daily basis in the occupational therapy clinic of the Atlanta VA facility.

- **Bobbie Rosenthal** (Chief of Social Work at San Francisco), **Judy Arnold** (Associate Chief of Social Work at VA Eastern Kansas) and **Dan Robbin** (Miami VAMC) completed their second week of Leadership VA with a visit to VA Central Office. This is the first year that three social workers have been accepted into this VA leadership training program.
- **Virginia Spini**, social worker of the Tennessee Valley Healthcare VA, York Campus initiated a drive to collect needed items for shipping to active duty service members. Virginia enlisted the support of social work staff at both campuses and volunteered to pack the items for mailing.



SOCIAL WORKERS IN THE NEWS

RECOGNITIONS



- **Shirley Jackson and Patricia Robinson**, social workers at the VA Boston, were elected and sworn in to the Massachusetts Governor's

Committee for Women Veterans. This is quite an honor!

- **Pamela Lynch**, social worker at the Cleveland VAMC, will be presenting a workshop entitled "Primary Care: Social Work's New Frontier" at the conference of the Ohio Chapter of NASW in September in Columbus. Pam is one of two social workers assigned to the outpatient Medical FIRM Clinics at Cleveland.
- **Chester Papineau** OEF/OIF Social Worker, , was quite instrumental in assisting SFC M.H. receive his well deserved Purple Heart. Chester, who is retired Army, utilized his knowledge of DOD, to cut to the chase and advocate for SFC Hurst. The Purple Heart award was presented to SFC M.H. during a special ceremony to dedicate the hallways at the Atlanta VA Medical Center. A member of Army Reserve Unit 314 in Carrollton, Georgia, SFC M.H. was wounded in Iraq when his convoy was hit by a rocket propelled grenade

- **Cheryl Coviello**, MSW, LCSW Community Residential Care/GPD Bedford VA, was recently interviewed for an article on returning OIF/OEF soldiers. To read this article, click on the web link below , click on March 13, and then click on the title "Coming Home"
<http://www.eagletribune.com/framesets/searcharch.htm>
- **Bob Kelter** SW Executive and seamless transition POC at Madison. "An awesome counselor" is referenced in the Madison Capital Times article about a women OIF veteran. Note that she speaks very highly of the Madison VA and credits Bob with helping her with PTSD. To read more on this article, click on the web Link below
<http://www.madison.com/archives/read.php?ref=ct:2005:06:09:418613:FRONT>
- **Dan Moriarty** the SW Executive and EX-POW Coordinator at White River Junction VAMC. May/June issue of Vanguard- page 34. There's a very nice story about how Dan helped six WWII vets apply for the Bronze Star and another for the Purple Heart. The medals were presented during the "National Salute to Hospitalized Veterans" ceremony at White River Junction. I'm

Continued on page 12

sure that receiving these long-overdue medals meant a great deal to the WWII vets receiving them. Dan, you're one of a kind!! The hallway dedication ceremony is a patriotic tribute to honor all American veterans. Hospital corridors will be named to reflect various military conflicts from World War I to present.

- **Byron Scheider**, LCSW from Little Rock is the co-author of a Time Management Skills/Overview. He collaborated with Victoria Clark, MSN to develop this web-based training. You may access this course by logging onto the website <http://vaww.va.gov/occ/trainingcenter/default.htm>. (see further directions on page 12)

- ◆ Scroll down to the Care Coordination/Home Telehealth box and click the arrow "begin this track".
- ◆ Log on with your password etc. (register and get a password etc if you don't have one)
- ◆ Click the Available Courses Button.
- ◆ Type "time management" in the "keyword" search window.
- ◆ Click [Care Coordination and Home Telehealth: Clinical Operations, Part 1 <>](#).
- ◆ Register for the course.
- ◆ The time management piece is a part of the course and can be found in the course outline when you have registered.

- **VA's 75th Anniversary** at Constitution Hall. The MC was Adrian Cronauer (Air Force DJ during the Vietnam War made famous by Robin Williams in the movie, "Good Morning, Vietnam"). Secretary Nicholson and Vice President Cheney spoke about the important work that VA employees do in caring for veterans and their commitments to veterans in the future. Dr. Michael DeBakey introduced the Vice President. As part of the ceremony, EES created a commemorative video about VA, VHA, VBA and NCA. Some of the video clips they used came from our SW video. Social workers featured prominently in the 75th Anniversary video, including **Bobbie Rosenthal**, Chief of SW at San Francisco; **Marguerite David**, Seattle; **Linda Gillespie-Gately**, Seattle; **Amy Morrow** Eastern Kansas and Kristin Day.

- **Mel Tapper and the VHA SW Research Advisory Board** article on the Social Work Intern Practice Evaluation Initiative will be featured in the NASW Health Specialty Practice newsletter. Congratulations to Mel and the RAB! The RAB also thanks Judy Arnold and Jerry Satterwhite and the Education Committee in

kudos for this project for their collaboration and support in 2003/2004 and this year.

Congratulations to everyone

We're on the Web!

Visit us at:

Intranet: vaww.va.gov/socialwork
Internet: www.va.gov/socialwork

In our Next Edition:

Changes in SYNERGY:

- Parting Words from Rocco Bagala
exiting editor
- Welcome to Erica Taylor
New Assistant Editor
- The Future of Synergy
Jennifer Summers - Editor

Jill Manske - NASW Award

Zelda Foster - Columbia University School of Social Work Hall of Fame

Treating the Wounded Mind - article

New Recognitions and Awards

New Best Practices



Announcements



Web Links



WEB SITES

If you have some great web sites and you'd like to share them with our readers, please send the e-mail address and a short narrative about the website to: Jennifer.Summers@med.va.gov

VISN 2 USSW conference poster presentation
<http://vaww.visn2.med.va.gov/news/n2n.html>

The Returning Service Members website on the VA intranet can be useful to Liaisons, POCs, and Case Managers. There are a variety of categories and contacts on the site, including a list/contact information for the VA/DoD Liaisons, VISN POCs and facility POCs, which is updated on a regular basis. Additionally, there is a section of "success stories" that share approaches that have been done by various facilities in serving OIF/OEF returning service members.
<http://vaww.vsscportal.med.va.gov/rsmtaskforce/>

Women's Health link:
<http://vaww.vamhcs.med.va.gov/ClinicianResources/WomensHealth/default.htm>

VHA SW Monthly Conference Call

The VHA SW conference call is a chance for every social worker to listen, learn and ask questions on issues related to social work. The purpose of the calls will be to share new information, highlight best practices, discuss clinical and administrative challenges and provide support. Topics of discussion are based in part, on social workers suggestions. Cue's will be offered (whenever possible) for a specific topic

Please e-mail Kristin.Day@med.va.gov to identify what you would like included in the calls. Feel free to include best practices too. Let everyone benefit from your initiatives!

FY05 schedule:

08/12/05 1:00 PM EST
 09/09/05 1:00

FY06 schedule

10/14/05 1:00
 11/11/05 1:00

As you can see this is the 2nd Friday of the month. The call in number is 1-800-767-1750 and our access code will be **16389**. This will be the access code for all future calls. Please make calls as a group as there are only a limited amount of lines.

Synergy Articles

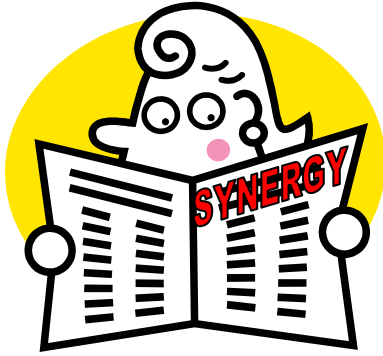
SYNERGY welcomes best practice/articles on any topic that relates to social work within the Department of Veterans Affairs. While social workers are our primary target group, contributors can be from any discipline that works with social work. **SYNERGY** is an excellent tool for communicating information and ideas with hundreds of your peers.

Need an idea for an article:

- Geriatrics & Extended Care
- Nursing Home Care
- TeleHealth
- Palliative Care
- Mental Health
- Primary Care Social Work
- Hospice
- Women Veterans

Jennifer.Summers@med.va.gov - Editor
Erica.Taylor@med.va.gov - Assistant Editor

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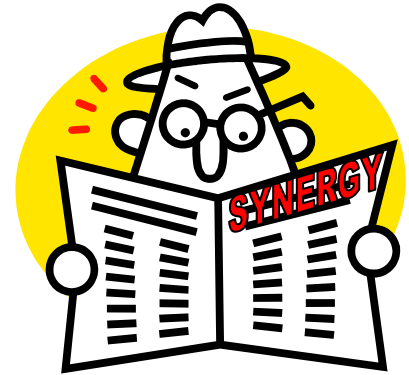


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